

This Computes!



Department of Health Care Services Children's Medical Services Network (CMS Net) - Information Bulletin #429

June 28, 2013 Change Cycle

The CMS Net applications will be down at 5:00 p.m. on Friday, June 28th and all day Saturday, June 29th. The CMS Net applications will be available starting at 6:00 a.m. on Sunday, June 30th. This update will implement changes included in the June 2013 change cycle further described below:

CMS Net Web:

Registration

Patient Registration, Statewide Client Index (SCI) Inquiry and Mark Duplicate and have been removed from Legacy and is available in CMS Net Web. Please review the webinar and/or download the User Guide.

Some of the changes include, but are not limited to:

- Removed the case status Transfer/Active and its association to Transfer Letters
- Case number field will now show all case numbers that a client has been known by with a mouse hover
- Client Index Number (CIN) will show all CINs that a client has been known by with a mouse hover
- Removed School and MTU Name, these fields are now populated based upon entries from the Medical Therapy Program (MTP) module
- Added new flag "Case transferring to another County". May be checked for cases that are Active, Pending or Reopen pending.
- Mother's Maiden Name is no longer required
- Added new Referral sources table entries
- Telephone number is no longer required for Patient Address contact, only Primary Address contact
- Removed Edit Case number as a menu selection, users with proper security to edit case numbers may edit the Case number field directly

- Removed Pending Transfer as a menu selection, Transfer letters are now initiated in the web Correspondence module
- Registration Display has been replaced with a Face Sheet hyperlink in the web
- Removed the fields related to caregivers: Caregiver's Name, Placed Out Of Home, Type of Placement, Where Placed. Caregiver information is now part of the Address Contact entries with a new flags for Caregiver and Involuntary placement
- New Bad Address and Do not send mail flags for Address contacts if mail should not be generated for the contact addressee
- Diagnosis code is no longer required
- Enhanced caseloads in Registration, for counties not participating in caseload distribution, you may create new caseloads in registration by assigning case managers or nurses to the client. The new caseload will be available for selection the next time a client is registered.
- Enhanced case note for registration allowing selection of a subject code
- New documentation button to add supporting documentation and address contact that was submitted with the case referral
- New summary tab to display events related to the case in reverse chronological order
- Updated business rules for flagging a case as duplicate. Cases that are active may not be flagged as duplicate
- Streamlined SCI inquiry search by performing an inquiry/add transaction for a CIN on the Statewide Client Index database
- Enhanced Medi-Cal Eligibility Data System (MEDS) inquiry, upon saving a new registration a MEDS inquiry is automatically performed and displays results on Registration under the MEDS Inquiry Information header.
- Moved Mother's Medi-Cal number to Registration from Legacy
- Added new Gender selection of Not Known
- Added Temporary Caseload assignment indicator to Client header, Face Sheet and Patient Information tab
- Note that moving the Registration functionality to web included mapping of several fields to a new database structure. Be aware there may be a loss of data for the following fields: Caregiver, County Case Manager, Regional Office Case manager, Referral Source
- Only 3 months of "bad" records were converted, all other records were removed in the conversion

Client Search

Separated client name into Last Name, Appellation, First Name and Middle Name to standardize all searches

Referral Tracking

Referral Tracking Module was created to provide an efficient way for CCS and GHPP users to record and track Case and/or Service referrals received from Providers and/or Medi-Cal Managed Care or Healthy Family Plans.

CMS Net users will be able to determine if there is sufficient information to being the registration process into CCS or GHPP. Any information entered and saved in Referral Tracking can be imported into CMS Net Registration where the data is auto-populated in corresponding fields.

Referral Tracking will only track and display referrals received from providers, Medi-Cal Managed Care and Healthy Families Plans. Referrals from any other source must be entered directly from the Registration Module.

Referral Tracking is used for:

- Entering minimal referral details for a new or existing client
- Tracking Referrals
- Tracking Referral History
- Notify the Referral Source of an “Inappropriate Referral”
- Creating Referral Reports
- Providing Referral information in PEDI for providers and plans to view the referral status

Referral Tracking Module can be found by logging into CMS Net web and clicking on the Referral Tracking menu option.

Correspondence:

Medical Report Request

Medical Report Request series has been removed from CMS Net Legacy and is available to be generated and completed on Web Correspondence in CMS Net Web.

- User can generate/request Medical Report Request series
- User can search for Medical Report Request series in Correspondence Search by client, by category, by advanced search and by Pending Medical Report Request quick link.

Pending Medical Report Request Quick Link

The quick link displays a list of pending medical requests created by the current user logged in and navigates to the Correspondence Search results as seen below. Pending medical report requests with a tickler date 20 days prior to the current date and ticklers in the future are displayed in the search results.

Medical Report Received/Unsolicited Report

Medical Report Received/Unsolicited Report has been removed from CMS Net Legacy and is available on Web Correspondence in CMS Net Web.

- User can enter medical receive status as Received, Not Received, Not Seen on the Medical Report Request correspondence.
- User can undo a Medical Report Status entered in error.
- User can enter Unsolicited Medical Report received information as a miscellaneous correspondence.

Transfer Letters

Pending Transfer is removed from CMS Net Legacy and available in Web Correspondence on CMS Net Web.

Transfer Letter series allows a user to generate and complete the Transfer Letter series and set up ticklers.

User will be able to do the following:

- Generate Transfer Letter series
- Search for Transfer Letter series
- Cancel Transfer Letter series
- Start a New Cycle

Add Cc Button

User no longer has to reissue a letter to add more courtesy copy. The Add Cc button will allow a user to add Cc to an existing sent correspondence.

Provider Registration

A PMF or Non-PMF record can now have multiple correspondence addresses.

Note: only users with Provider Registration access/role (County System Admin) may update the correspondence address on the PMF or a Non-PMF record in Provider Registration.

SAR

- A “Patient Not Discharged” check box was added to the SAR module. Users with SAR Override can check this box and the system will allow the number of days on the inpatient SAR to equal the Service and End Date range.
- The SAR Cancellation or Denial reason, “Family/Client Request a Change of Provider” has been added to the Reason for Cancellation/Reason for Denial drop down List and will impact all SAR types, CCS, GHPP, as well as EPDST SARs. Selection of this reason will not generate a Notice of Action. A Cancellation Letter will be generated.

Provider Management (Applicable to State Staff Only):

- Corrected a defect in the system which now allows PSU Management to change a Panded Provider's Board Status to "Lifetime Board" and the status is maintained after saving the record.

Application Status screen (Reason no action)

The 'Reason no action' field is no longer a free text field.

User must select one of the following when for the "Reason no action" when 'No action' is selected:

- APP NOT RETURNED
- APP WAS NOT SIGNED
- CLIENT REQUESTS NO APP
- NEW APP LETTER CYCLE
- NO RESPONSE
- RETURNED BY USPS
- SIGNATURE MISSING
- SIGNATURE NOT VALID
- UPDATING APPLICATION

Business Objects:

- Adding fields: "Caseload ID", "Caseload Organizational Unit", "Caseload Organizational Unit Parent", and "Transfer".
- Removing fields: "Temporary Case Number", "Alias", "Birth Name", "County Close Request Date", "Subcategories Under Medi-Cal", and "Medical Eligibility MTU Previous Transfer" as these fields were either obsolete or unused. Note: if a case is still pending, the temporary case number will be in the "Case Number" field.
- "Share of Cost" field now accurately displays the patient's share of cost.
- Address table now contains address types "Other", "Special Care Center", "MTU", and "School".
- "First Authorized Date" will now pull the first web authorization the patient was issued instead of the first legacy authorization.
- Tables County Case Manager and Regional Case Manager will now pull two identified Case Managers of a client's caseload. County and Regional Case Manager fields from legacy registration were not mapped to the web; non-participating caseload counties will need to enter in each patient's case managers under the "Caseload" section.
- The "Social Security Number" field will display a patient's SSN or pseudo SSN.

Reference

Webinars for Referral Tracking, Registration, Medical Report Request/Receive and Transfer Letters are located:

<http://www.dhcs.ca.gov/services/ccs/cmsnet/Pages/Webinar.aspx>

User Guides for these updated modules are located:

<http://www.dhcs.ca.gov/services/ccs/cmsnet/Pages/WebManual.aspx>

Browser changes:

It is recommended that all users clear their temporary internet browser files and history before logging into the CMS web applications after the Change Cycle release.

You may do so using the Tools->Delete browsing history option or Safety->Delete browsing history option on your Internet Explorer browser.